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**TO: U.S. Patent and Trademark Office**

**FROM: Stephen T. Scherrer**

**RE: Attorney Docket No. ECS-P-09-001  
Transmittal Form (1 pg.)  
Certificate of Transmission Under 37 CFR 1.8 (1 pg.)  
Request for Withdrawal as Attorney and Change of  
Correspondence Address (2 pgs.)**

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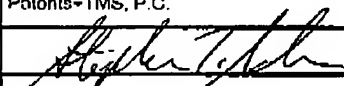
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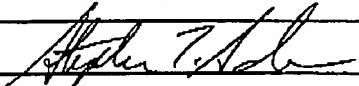
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/679,075	
	Filing Date	October 3, 2003	
	First Named Inventor	DURHAM, Steven	
	Art Unit	3633	
	Examiner Name	PHI A	
Total Number of Pages in This Submission	5	Attorney Docket Number	ECS-P-09-001

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission (1 pg.) Fax Cover Sheet (1 pg.)
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Printed name	Stephen T. Scherrer		
Date	February 25, 2009	Reg. No.	45,080

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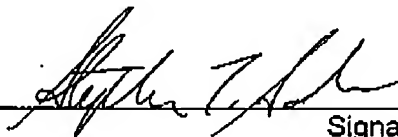
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Doc Code: PET,POA,WDRW

Document Description: Petition to withdraw attorney or agent (SI83)

PTO/SB/83 (11-08)

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/679,075
Filing Date	October 3, 2003
First Named Inventor	DURHAM, Steven
Art Unit	3633
Examiner Name	PHI A
Attorney Docket Number	ECS-P-09-001

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the practitioners of record;
- ☐ the practitioners (with registration numbers) of record listed on the attached paper(s); or
- ☒ the practitioners of record associated with Customer Number: 29013

**NOTE:** The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.

The reason(s) for this request are those described in 37 CFR :

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| <input type="checkbox"/> 10.40(c)(1)(v) | <input type="checkbox"/> 10.40(c)(1)(vi)        | <input type="checkbox"/> 10.40(c)(2)                       | <input type="checkbox"/> 10.40(c)(3)                |
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**Check each box below that is factually correct. WARNING: If a box is left unchecked, the request will likely not be approved.**

- ☒ I/We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment.
- ☒ I/We have delivered to the client or a duly authorized representative of the client all papers and property (including funds) to which the client is entitled.
- ☒ I/We have notified the client of any responses that may be due and the time frame within which the client must respond.

Please provide an explanation, if necessary:

[Page 1 of 2]

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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AS ATTORNEY OR AGENT  
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OR

B. ☒ Inventor or  
Assignee name Durham, Steven

Address 695 N. A1A Unit 106

City Ponte Vedra Beach State FL Zip 32082 Country USA

Telephone \_\_\_\_\_ Email \_\_\_\_\_

I am authorized to sign on behalf of myself and all withdrawing practitioners.

Signature 

Name Stephen T. Scherrer Registration No. 45,080

Address 2849 W. Armitage Ave.

City Chicago State IL Zip 60647 Country USA

Date February 25, 2009 Telephone No. 773-772-6009

NOTE: Withdrawal is effective when approved rather than when received.

(Page 2 of 2)

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